## How can dentists help patients with diabetes?

The British Society of Periodontology (BSP) together with Diabetes.co.uk is running a campaign to raise awareness of the increased risk of periodontal disease in people living with diabetes.

Diabetes.co.uk and BSP recently carried out a survey of people living with diabetes. This showed that three-quarters of them had experienced bleeding when brushing. Worryingly only around 50% had ever received information about periodontal disease from a dentist, a doctor or a pharmacist.

Poorly managed blood sugar levels in people with diabetes causes damage to nerves, blood vessels, the heart, the kidneys, the eyes and the feet. In the same way, the periodontium can also be affected. The damage to the blood vessels makes infections of the soft tissues and the bone supporting the teeth more likely. Poorly controlled blood sugar levels lead in turn to a rise in sugar levels in saliva, which increases the formation of dental plaque.

Evidence shows that severe periodontal disease can increase blood sugar levels in people with diabetes and also in those who do not have diabetes. Interestingly, there is some scientific evidence to suggest that having periodontal treatment can improve long-term blood glucose levels in people with poor control. This in turn lowers the risk of experiencing the other common long-term complications of diabetes, including heart and kidney disease.

In other words, we now know that periodontal disease and diabetes are linked in both directions. Keeping blood glucose levels low and stable can reduce the risk of periodontal disease, and looking after oral health could help to improve long-term outcomes in people living with diabetes.

## How can you help?

Dentists can help patients with diabetes by taking the following steps:

- Ask: Ask all patients with diabetes if they know that gum disease might be a complication of their diabetes and that gum disease can affect their diabetes care.
- Assess: Screen for the presence of periodontal disease using the Basic Periodontal Examination: http://www.bsperio.org.uk/ publications/downloads/94\_154250\_bpe-2016-po-v5-final-002. pdf





• Act: Provide treatment as appropriate according to the BSP guideline: http://www.bsperio.org.uk/publications/downloads/90\_123718\_bpe-\_bham\_bsp-2016.pdf.

If no periodontitis is diagnosed initially, the patient should be placed on a preventive care programme and monitored regularly for any changes in periodontal status.

Write to the patient's doctor including details of the diagnosis and treatment and inform the doctor of the increased risk of periodontal disease in the patient. The following template available on the BSP website may be useful: http://www.bsperio.org.uk/howsyoursmile/index.html#resources.

The following poster for healthcare professionals explains the key messages: http://www.bsperio.org.uk/howsyoursmile/diabetes2017/Health-Care\_Professionals.pdf.

The following patient poster can be displayed in waiting rooms: http://www.bsperio.org.uk/howsyoursmile/diabetes2017/ Patient\_gum\_awareness.pdf.

Dentists can help patients living with diabetes by giving them the information they need to take responsibility for their oral health.

Patients may find it useful to visit the BSP website for further information including the recently updated patient information leaflet: http://www.bsperio.org.uk/publications/downloads/95\_105645\_bsperio-patient-information.pdf.



A patient with diabetes and generalised severe chronic periodontitis, before (left) and after treatment